

SERFF Tracking Number:	UNKP-125655356	State:	Arkansas
Filing Company:	Milwaukee Casualty Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CM-0809-01-382		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0000 Inland Marine Sub-TOI Combinations
Product Name:	Commercial Inland Marine		
Project Name/Number:	/AR-CM-0809-01-382		

## Filing at a Glance

Company: Milwaukee Casualty Insurance Company

Product Name: Commercial Inland Marine	SERFF Tr Num: UNKP-125655356	State: Arkansas
TOI: 09.0 Inland Marine	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 09.0000 Inland Marine Sub-TOI Combinations	Co Tr Num: AR-CM-0809-01-382	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Authors: Denise Freund, Tyrone Settlemier	Disposition Date: 05/29/2008
	Date Submitted: 05/20/2008	Disposition Status: Approved
Effective Date Requested (New): 09/01/2008		Effective Date (New): 09/01/2008
Effective Date Requested (Renewal): 09/01/2008		Effective Date (Renewal): 09/01/2008

State Filing Description:

## General Information

Project Name:	Status of Filing in Domicile:
Project Number: AR-CM-0809-01-382	Domicile Status Comments:
Reference Organization: NA	Reference Number: NA
Reference Title: NA	Advisory Org. Circular: NA
Filing Status Changed: 05/29/2008	
State Status Changed: 05/29/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Filing to adopt all currently approved Company forms for new company - Milwaukee Casualty Insurance Co.	

## Company and Contact

### Filing Contact Information

SERFF Tracking Number: UNKP-125655356 State: Arkansas  
Filing Company: Milwaukee Casualty Insurance Company State Tracking Number: EFT \$50  
Company Tracking Number: AR-CM-0809-01-382  
TOI: 09.0 Inland Marine Sub-TOI: 09.0000 Inland Marine Sub-TOI Combinations  
Product Name: Commercial Inland Marine  
Project Name/Number: /AR-CM-0809-01-382

Freund Denise, State Filings Analyst dfreund@unitrin.com  
12790 Merit Drive (800) 777-2249 [Phone]  
Dallas, TX 75251 (214) 360-8060[FAX]

**Filing Company Information**

Milwaukee Casualty Insurance Company CoCode: 26662 State of Domicile: Wisconsin  
12790 Merit Drive Group Code: 215 Company Type: Prop & Cas  
Dallas, TX 75251 Group Name: Unitrin Prop & Cas State ID Number:  
(800) 777-2249 ext. 8194[Phone] FEIN Number: 39-1190263  
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## Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Milwaukee Casualty Insurance Company	\$50.00	05/20/2008	20416600

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## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Approved	Llyweyia Rawlins	05/29/2008	05/29/2008

<i>SERFF Tracking Number:</i>	<i>UNKP-125655356</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Commercial Inland Marine</i>		
<i>Project Name/Number:</i>	<i>/AR-CM-0809-01-382</i>		

## Disposition

Disposition Date: 05/29/2008

Effective Date (New): 09/01/2008

Effective Date (Renewal): 09/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	UNKP-125655356	State:	Arkansas
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Product Name:	Commercial Inland Marine		
Project Name/Number:	/AR-CM-0809-01-382		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Company Cover Letter	Approved	Yes
Form	Notice- Restrictions of Terrorism Coverage	Approved	Yes
Form	Notice- Terrorism Coverage - Rejection Statement	Approved	Yes
Form	OFAC	Approved	Yes

SERFF Tracking Number: UNKP-125655356 State: Arkansas

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TOI: 09.0 Inland Marine Sub-TOI: 09.0000 Inland Marine Sub-TOI Combinations

Product Name: Commercial Inland Marine

Project Name/Number: /AR-CM-0809-01-382

## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Notice- Restrictions of Terrorism Coverage	30-0873	12 07	Disclosure/ New Notice			(SERFF) 30-0873 12 07 Terrorism Policyholder Notice.pdf
Approved	Notice- Terrorism Coverage - Rejection Statement	30-0722	04 04	Disclosure/ New Notice			(SERFF) 30-0722 04 04 Interline Notice Rej With Prem.pdf
Approved	OFAC	IL P 001	01 04	Disclosure/ New Notice			IL P 001 01 04 OFAC.pdf

# NOTICE TO POLICYHOLDERS

## RESTRICTIONS OF TERRORISM COVERAGE

This Notice has been prepared in conjunction with the implementation of changes related to coverage of terrorism under your policy. It contains a brief synopsis of significant exclusionary provisions and limitations.

This Notice does **not** form a part of your insurance contract. This Notice is designed to alert you to coverage restrictions and to other provisions in the terrorism endorsement in this policy. If there is any conflict between this Notice and the policy (including its endorsements), the provisions of the policy (including its endorsements) apply.

In accordance with the **Terrorism Risk Insurance Program Reauthorization Act of 2007 (TRIPRA)**, we are required to offer you coverage for losses resulting from an act of terrorism, *as defined in Section 102(1) of the Act*: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury – in concurrence with the Secretary of State, and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

### CHANGE IN THE DEFINITION OF CERTIFIED ACTS OF TERRORISM AND INFORMATION ON LIMITATIONS ON FEDERAL AND INSURER LIABILITY

Under the Federal **Terrorism Risk Insurance Program Reauthorization Act of 2007**, the definition of "certified acts of terrorism" (which is more fully defined in the endorsement) no longer requires that the act of terrorism be committed by or on behalf of a foreign interest. Therefore, coverage for "certified acts of terrorism" now encompasses, for example, an act committed against the United States government by a United States citizen, when the act is determined by the federal government to be a "certified act of terrorism" under the terms of the **TRIPRA**. Coverage is subject to all policy exclusions (for example, nuclear hazard and war exclusions) and other policy provisions.

The government may participate in paying for some of the losses from a "certified act of terrorism". However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a Program Year (January 1 through December 31), the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion. Further, this coverage is subject to a limit on our liability pursuant to the federal law, that is, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a Program Year (January 1 through December 31) and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion. In such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

Refer to the terrorism endorsement for the definition of "certified acts of terrorism." Refer to the endorsement, and to the rest of the insurance contract, for provisions that govern coverage for, or that exclude coverage for, losses arising from terrorism.



Carefully read your policy, including the endorsements attached to your policy.

***WE HAVE INCLUDED A PREMIUM CHARGE ON YOUR POLICY FOR  
"CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM."***

**THE PREMIUM CHARGE FOR THE TERRORISM COVERAGE  
IS SHOWN EITHER ON THE "DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE  
ACT" OR "DISCLOSURE OF PREMIUM AND ESTIMATED PREMIUM" OR YOUR POLICY  
DECLARATIONS**

### **YOUR POLICY**

Your policy does not contain a terrorism exclusion. However, we have included an endorsement under which coverage for "certified acts of terrorism" (which is more fully defined in the endorsement, but involves acts of terrorism by or on behalf of a foreign interest) is subject to a limit on our liability pursuant to the **Terrorism Risk Insurance Program Reauthorization Act of 2007 (TRIPRA)**. The terrorism definition is based on **TRIPRA**, under which the federal government determines when a "certified act of terrorism" has occurred. The government may participate in paying for some of the losses from such an event. This coverage is subject to a limit on our liability pursuant to the federal law and is subject to all policy exclusions (for example, nuclear hazard and war exclusions) and other policy provisions.

**Unless you notify us in writing that you wish to reject terrorism coverage, we will include terrorism coverage in your policy.** You may reject this offer by signing the enclosed REJECTION STATEMENT and returning it to us. Once we receive the signed rejection form your policy will be endorsed to exclude the terrorism coverage and the premium amount refunded to you.

## **PROPERTY SECTION**

### **NOTICE APPLICABLE ONLY in California, Missouri, Oregon, Wisconsin:**

STATE REQUIREMENTS BECAUSE OF THE STANDARD FIRE CLAUSE: The terrorism exclusion does not restrict fire coverage under Commercial Property, Commercial Inland Marine and Farm insurance due to a statutory requirement in these states. Therefore, losses attributable to fire following an act of terrorism, if otherwise covered, remain covered under such insurance. An appropriate premium charge is included in your policy.

### **NOTICE APPLICABLE ONLY in Georgia, Illinois, Iowa, and Washington:**

STATE REQUIREMENTS BECAUSE OF THE STANDARD FIRE CLAUSE: The terrorism exclusion does not restrict fire coverage under Commercial Property and Farm insurance due to a statutory requirement in this state. Therefore, losses attributable to fire following an act of terrorism, if otherwise covered, remain covered under such insurance. An appropriate premium charge is included in your policy.

POLICY NUMBER:  
POLICY EFFECTIVE DATE:

COMPANY REJECTION  
30-0722 04 04

## NOTICE – TERRORISM COVERAGE

### REJECTION STATEMENT

I have read the RESTRICTIONS OF TERRORISM COVERAGE – NOTICE TO POLICYHOLDERS and I hereby reject the offer of terrorism coverage. I understand that an exclusion of certain terrorism losses will be made a part of my policy.

I REJECT THE TERRORISM COVERAGE:

\_\_\_\_\_  
(Signature of Insured)

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
(Signature of Insured)

\_\_\_\_\_  
(Date Signed)

*Trinity Universal Insurance Company  
Trinity Universal Insurance Company Of Kansas, Inc.  
Security National Insurance Company*

*Milwaukee Casualty Insurance Co.  
Milwaukee Insurance Company  
Valley Insurance Company  
Valley Property & Casualty Insurance Company*

# U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS

No coverage is provided by this Policyholder Notice nor can it be construed to replace any provisions of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided.

This Notice provides information concerning possible impact on your insurance coverage due to directives issued by OFAC. **Please read this Notice carefully.**

The Office of Foreign Assets Control (OFAC) administers and enforces sanctions policy, based on Presidential declarations of "national emergency". OFAC has identified and listed numerous:

- Foreign agents;
- Front organizations;
- Terrorists;
- Terrorist organizations; and
- Narcotics traffickers;

as "Specially Designated Nationals and Blocked Persons". This list can be located on the United States Treasury's web site – <http://www.treas.gov/ofac>.

In accordance with OFAC regulations, if it is determined that you or any other insured, or any person or entity claiming the benefits of this insurance has violated U.S. sanctions law or is a Specially Designated National and Blocked Person, as identified by OFAC, this insurance will be considered a blocked or frozen contract and all provisions of this insurance are immediately subject to OFAC. When an insurance policy is considered to be such a blocked or frozen contract, no payments nor premium refunds may be made without authorization from OFAC. Other limitations on the premiums and payments also apply.

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<i>Project Name/Number:</i>	<i>/AR-CM-0809-01-382</i>		

## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

<b>Satisfied -Name:</b>	Uniform Transmittal Document-Property & Casualty	<b>Review Status:</b>	Approved	05/29/2008
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### Comments:

### Attachments:

(SERFF) F777\_03\_07.pdf

(SERFF) F778\_03\_07.pdf

<b>Satisfied -Name:</b>	Company Cover Letter	<b>Review Status:</b>	Approved	05/29/2008
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### Comments:

### Attachment:

(SERFF) Letter\_Company\_Forms.pdf

# Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b>	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
g. SERFF Filing #:		
h. Subject Codes		

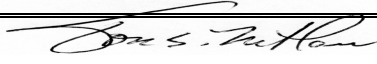
<b>3. Group Name</b>	<b>Group NAIC #</b>
Unitrin Property & Casualty Insurance Group	215

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Milwaukee Casualty Insurance Company	Wisconsin	26662	39-1190263	

<b>5. Company Tracking Number</b>	<b>AR-CM-0809-01-382</b>
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**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Jon Zetlau 12790 Merit Drive Dallas, TX 75251	Bureau/ Forms Compliance Manager	800/777-2249 ext 8034	214/360-8060	tsettlemer@unitrin.com

<b>7.</b> Signature of authorized filer	
<b>8.</b> Please print name of authorized filer	Jon Zetlau

**Filing information** (see General Instructions for descriptions of these fields)

<b>9. Type of Insurance (TOI)</b>	09.0 Inland Marine
<b>10. Sub-Type of Insurance (Sub-TOI)</b>	09.0000 Inland Marine
<b>11. State Specific Product code(s)</b> (if applicable)[See State Specific Requirements]	
<b>12. Company Program Title</b> (Marketing title)	
<b>13. Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
<b>14. Effective Date(s) Requested</b>	New: 09/01/08      Renewal: 09/01/08
<b>15. Reference Filing?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>16. Reference Organization</b> (if applicable)	NA

<b>17. Reference Organization # &amp; Title</b>	NA
<b>18. Company's Date of Filing</b>	May 21, 2008
<b>19. Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

### Property & Casualty Transmittal Document—

<b>20. This filing transmittal is part of Company Tracking #</b>	AR-CM-0809-01-382
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<b>21. Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Filing to adopt all previously approved Company forms for new Company - Milwaukee Casualty Insurance Co.

<b>22. Filing Fees</b> (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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**Check #:** NA  
**Amount:** NA

**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

Effective March 1, 2007

**\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**



**FORM FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes forms)  
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>		<b>AR-CM-0809-01-382</b>		
<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> (Company tracking number of rate/rule filing, if applicable)		<b>AR-CM-0809-02-383</b>		
<b>3.</b>	<b>Form Name /Description/Synopsis</b>	<b>Form # Include edition date</b>	<b>Replacement or Withdrawn?</b>	<b>If replacement, give form # it replaces</b>	<b>Previous state filing number, if required by state</b>
01	Notice to Policyholders- Restrictions of Terrorism Coverage	30-0873 12 07	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Notice- Terrorism Coverage- Rejection Statement	30-0722 04 04	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03	OFAC	IL P 001 01 04	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		



May 21, 2008

Arkansas Insurance Department  
1200 West Third Street  
Little Rock, AR 72201-1904

Attn: Property and Casualty Division

RE: Commercial Inland Marine – Company Forms  
Milwaukee Casualty Insurance Company – NAIC #26662; FEIN #39-1190263  
Company Filing Number: AR-CM-0809-01-382

Dear Sir:

For all policies effective on or after September 1, 2008, we wish to adopt the Company forms currently filed and approved for in our other companies.

In this initial filing, our intent is to file a program identical to the one currently filed and approved by the Arkansas Department of Insurance for Trinity Universal Insurance Company (NAIC #19887, FEIN #75-0620550).

Filing forms are attached for your review. Copies of all Company endorsements are also included.

Should you have any further questions or wish to discuss the matter further, please feel free to contact Tyrone Settlemier at (800) 777-2249 ext. 8034, [tsettlemer@unitrin.com](mailto:tsettlemer@unitrin.com), or by mail.

Sincerely,

A handwritten signature in black ink, appearing to read "Jon S. Zetlau". The signature is fluid and cursive.

Jon Zetlau  
Bureau and Forms Compliance Manager

JZ/df